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**NEW HAMPSHIRE**  
**2008**  
**MEALS & RENTALS**  
**TAX BOOKLET**  
**RSA 78-A - REV 700**

This booklet contains the following New Hampshire state tax forms and instructions necessary for the monthly and seasonal filing of the Meals & Rentals Tax (M&R).

<b>FORM</b>	<b>PAGE</b>
<b>CD-100</b> <b>LICENSE DATA UPDATE</b>	<b>8</b>
<b>DP-14 WORKSHEET</b>	<b>10, 11</b>
<b>DUE DATES</b> <b>MONTHLY FILING DUE DATES</b>	<b>10, 11</b>
<b>CD-3</b> <b>APPLICATION FOR LICENSE &amp; RENEWAL</b>	<b>13</b>
<b>DP-14 TAX RETURN</b>	<b>15, 17, 19</b>

**E-file at [www.revenue.nh.gov](http://www.revenue.nh.gov)**  
**or**  
**Telefile at 1-800-328-4557**

PLEASE SEE PAGE 1 OF THIS BOOKLET FOR ADDITIONAL TAXPAYER RESPONSIBILITIES.

**REMINDER:** To avoid delays in processing paper returns, operators must use the M&R Return provided by the Department and submit it with an original signature.

**TAX RATE:** An 8% tax is assessed upon patrons of hotels and restaurants, on meals, alcohol and rooms costing \$.36 or more. An 8% tax is also assessed on motor vehicle rentals.

**TIMELY FILING:** Meals & Rental operators filing via the TELEFILE (telephone) and E-FILE (internet) Systems are reminded of the opportunity to file early. Payment from your authorized account will not be debited until the day after the due date (generally the 16th of each month) if you filed prior to the due date. File early, know your return is filed timely and avoid unnecessary penalties. Returns filed by paper must be received by the due date listed on the worksheet. The post mark on your envelope does not constitute a timely filed return.

**INTEREST RATE:** Effective January 1, 2008 through December 31, 2008, the interest due on taxes administered by the New Hampshire Department of Revenue Administration is **10%**. Interest is calculated on the balance of tax due from the original due date of the tax to the date the tax is paid. For interest rates in prior years see instructions.

**TAXABLE RENT:** The types of property for which taxable rent shall be collected shall include, but not be limited to, **any type of shelter which provides sleeping accommodations such as:** Hotels; Houses; Cottages; Apartments; Camps or Lodges of any kind; Chalets; or Rooms.

**SEASONAL FILERS:** Do not complete the "last day of business" section on a return unless you have actually ceased doing business entirely. E-file also has the "last day" option.

**CREDIT MEMO:** If you have received a credit memo from the Department, the credit amount may be used to reduce a subsequent payment. To utilize the credit, enter the amount on Line 14 of the Meals & Rentals Tax worksheet and also on e-file. Utilize the amount of the most recent credit memo you have received as the total is cumulative.

**TAXES AS A PERSONAL DEBT TO STATE:** All taxes required to be paid by operators, and all increases, interest, and penalties on the taxes, become a personal debt of the operator from the time due and payable to the Commissioner of Revenue Administration, pursuant to RSA 78-A: 20.

**TRANSACTION DOCUMENTATION:** E-FILERS print a copy of your completed transaction prior to exiting the E-FILE System. Retain this copy as a record of your transaction and confirmation number.

**NEED FORMS:** Copies of forms, laws and administrative rules may be obtained for free from our web site at [www.revenue.nh.gov](http://www.revenue.nh.gov). Forms may be ordered for free by calling our forms line at (603) 271-2192.

**NEED HELP:** This booklet contains general information to assist you in complying with your tax obligation. Rules, laws and answers to Frequently Asked Questions (FAQ's) are available from our web site at [www.revenue.nh.gov](http://www.revenue.nh.gov). If you have any questions regarding the Meals and Rentals Tax, the TELEFILE System or the E-FILE System, Central Taxpayer Services is available between 8:00 am and 4:30 pm, Monday through Friday at (603) 271-2191.

Individuals who need auxiliary aids for effective communication in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay 1-800-735-2964.



**MEALS & RENTALS TAX BOOKLET****Meals & Rentals Operator's Tax Responsibilities**

The most common taxes encountered by holders of Meals and Rentals licenses are the Meals and Rentals, the Business Profits and Business Enterprise Taxes. The following information regarding these taxes is meant to provide only a broad overview of these specific taxes, and is not intended to detail all of your obligations as a taxpayer. For example, in addition to these taxes, some operators may be subject to the Interest and Dividends Tax or the Communications Services Tax, which are not discussed here. It should also be noted that the obligations and penalties described here apply only to operators who are natural persons; corporate entities may face more significant penalties for tax law violations. The Department strongly encourages all operators to seek additional information regarding their tax obligations. Operators may also find it helpful to obtain the advice of a tax professional.

**The Meals and Rentals Tax - RSA 78-A**

The Meals and Rentals tax is an 8% tax assessed upon patrons of hotels and restaurants, and upon renters of motor vehicles. The tax is paid by the consumer, and is collected by the operator of the business providing the food, alcohol, room, or motor vehicle to the consumer. You, as an operator, are legally obligated to collect the appropriate tax from your patrons.

Operators must file a Meals and Rentals tax return and pay over the collected tax to the Department on a monthly basis. There are provisions for seasonal filings. The tax and the return must be paid to and filed with the Department on or before the 15<sup>th</sup> day of the month following the calendar month in which the tax was collected. For example, for taxes collected during the month of April, you must file a return and pay over those taxes to the Department by May 15. Operators who comply with the tax laws are permitted to retain 3% of the taxes due as compensation for their efforts. Those who fail to comply with the tax laws, however, are not entitled to retain any portion of the taxes collected, and face penalties for their non-compliance. As with failing to collect the tax, it is a Class B Felony to fail to truthfully account for and pay over the appropriate tax to the Department. Additionally, as an operator, you represent only the conduit between the consumer and the State with regard to the Meals and Rentals tax. The money that you collect as Meals and Rentals tax does not lawfully belong to you. Accordingly, should you fail to pay over the collected tax to the State, you could also be charged with theft. Depending on the amount of money at issue, you could be convicted of a Class A Felony, which carries a maximum penalty of 7½ to 15 years in the New Hampshire State Prison, in addition to various criminal and civil monetary penalties.

Operators must file a return every month, regardless of whether they have had any activity during the previous month. Returns must be filed electronically, via touch-tone telephone or personal computer. **You are only permitted to file via a paper return if your taxable revenue for the previous calendar year was less than \$25,000.**

**Recordkeeping/Retention - RSA 78-A:19 and Rev 706.01**

Operators must maintain records for three (3) years from the due date of the tax. Revenue Rule 706.01 (d) provides that in the event the operator's records are not adequate to make an accounting to the state for the tax collection liability, the Department shall determine a liability based on any and all available records and deny the 3% commission available under RSA 78-a:7, III.

**The Business Profits Tax - RSA 77-A**

The business profits tax is assessed at a rate of 8.5% upon all of an organization's net income that is derived from activity within New Hampshire. The tax applies to organizations that have more than \$50,000 in gross receipts from all of their activities. In other words, in determining whether an organization has met the \$50,000 threshold, the Department will take into account all of the business activity that an organization conducts worldwide, and not just the business that is conducted in New Hampshire. The tax is then apportioned, so that it is owed and paid only on the New Hampshire receipts. Organizations that have \$50,000 or less in gross receipts worldwide are not required to file a Business Profits tax return.

For businesses organized as corporations, business profits tax returns are due on the 15th day of the 3rd month following the end of the taxable period. Entities organized as sole proprietorships or partnerships must file their business profits tax returns by the 15th day of the 4th month following the end of the taxable period. Non-profit organizations must file their returns by the 15th day of the 5th month following the end of the taxable period.

**The Business Enterprise Tax - RSA 77-E**

A 0.75% tax, is assessed on the enterprise value tax base, which is the sum of all compensation paid or accrued, interest paid or accrued, and dividends paid by the business, after special adjustments and apportionment. Businesses with more than \$150,000 of gross receipts from all their activities or an enterprise value tax base more than \$75,000, are required to file a return. (The filing thresholds for taxable periods ending on or before June 30, 2001, are \$100,000 and \$50,000, respectively.)

Proprietorship, partnership and fiduciary returns are due on the 15<sup>th</sup> day of the 4<sup>th</sup> month following the end of the taxable period. Corporate returns are due on the 15<sup>th</sup> day of the 3<sup>rd</sup> month following the end of the taxable period. Non-profit returns are due on the 15<sup>th</sup> day of the 5<sup>th</sup> month following the end of the taxable period.

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION  
**MEALS & RENTALS TAX BOOKLET**  
 GENERAL INFORMATION

<b>M&amp;R TAX LICENSE REQUIREMENT</b>	The Meals & Rentals Tax is a tax assessed upon the patrons of hotels, restaurants and renters of motor vehicles based on the rents charged and upon meals and/or alcohol costing \$.36 or more. A Meals & Rentals tax operator's license is required by anyone engaging in business activities as defined in RSA 78-A. Questions concerning licensing requirements should be directed to the Department by calling (603) 271-2191.
<b>WHO MUST FILE</b>	Every operator having a New Hampshire Meals & Rentals Tax license must file a Meals & Rentals Tax return. <b>Operators must report monthly, even when no tax is due.</b> Approved seasonal operators must file returns for each month of their approved season.
<b>WORK-SHEET</b>	Every operator is required to complete the worksheet monthly. Operators filing by E-FILE shall print a hard copy monthly. All records, including the worksheet, shall be retained for a minimum of three years from the due date of the tax or the date the return was filed, whichever is later.
<b>ELEC-TRONIC FILING</b>	To report the Meals & Rentals Tax information electronically, the operator can use either the TELEFILE or the E-FILE options explained below. When an operator E-files or telefiles a return the system will request the federal employer identification number or social security number as a security check. The system will then allow the operator to create a personal identification number (PIN).
<b>ELEC-TRONIC PAYMENTS</b>	For each Meals & Rentals operator filing electronically, the operator shall enter his/her banking information while <u>e-filing</u> or <u>telefiling</u> a return. This ACH Debit Authorization allows the Department to electronically process the payment of tax due from the account specified by the operator. This ACH Debit Authorization remains in effect until the operator changes it via E-file or Telefile.
<b>TELEFILE</b>	<ul style="list-style-type: none"> <li>After completing the worksheet contained in this booklet, the TELEFILE system may be accessed by dialing 1-800-328-4557 from a touch-tone telephone 24 hours a day, 7 days a week. Listen carefully to the prompts, then make your selection.</li> <li>The automated system will prompt the operator to provide their license number and PIN prior to entering certain tax information from the prepared worksheet.</li> <li>After entering your license number and PIN, you will have the opportunity to 1) file your return; 2) create or change your bank information 3) create or change your PIN; 4) delete a previously filed transaction up to 2:00 pm the day before the due date of the transaction or any combination of the four options.</li> <li>The TELEFILE system will provide step-by-step instructions on filing your return. If at any time during the filing process you do not hear the instructions, wait a few seconds and TELEFILE will repeat them to you. You will have several opportunities to enter the requested entry prior to having the call disconnected.</li> <li>Once the tax information has been entered and verified, TELEFILE will issue a ten (10) digit confirmation number as a record of the filing transaction.</li> <li>The operator should write this confirmation number on Line 22 of the worksheet. Questions concerning the TELEFILE or E-FILE systems may be directed to (603) 271-2191, Monday - Friday, 8:00 am - 4:30 pm.</li> </ul>
<b>VERIFYING CORRECT INFORMATION</b>	After each item of tax information has been entered, TELEFILE will repeat the information and will request you to acknowledge the accuracy of the entry. TELEFILE EXAMPLE: "You have entered Three Thousand One Hundred Ninety Seven Dollars. Press 1 if correct or press 2 to re-enter". If the entry should be 2197 instead of 3197, you would press 2. TELEFILE will again instruct you to enter the information and verify the amount. No more than three (3) attempts to enter the same entry will be allowed. If this occurs, the TELEFILE system will disconnect the call. If you are disconnected, please call (603) 271-2191.
<b>VERIFYING BANK INFORMATION</b>	The Telefile System will ask you to verify the last 4 digits of your bank account prior to issuing a confirmation number. Make sure the numbers match.
<b>E-FILE</b>	Operators may file via the internet by using their telefile PIN or by creating a new PIN. The E-FILE program will prompt the user to enter necessary tax information and, upon completion, will automatically transmit the information to the New Hampshire Department of Revenue Administration. The E-FILE program is available through the Department's web site <a href="http://www.revenue.nh.gov">www.revenue.nh.gov</a> . E-File help instructions and help screens are available on-line to assist you. <b>E-FILE DRA</b> <ul style="list-style-type: none"> <li>Access the Department's web site <a href="http://www.revenue.nh.gov">www.revenue.nh.gov</a>, select E-FILE DRA, and then select "Meals &amp; Rentals Tax" and follow the prompts.</li> <li>When you have completed and verified all return entries you are ready to transmit your return and payment.</li> <li>Upon completion of the transaction you will receive notification of your successful filing.</li> <li>Once confirmation has been received, <b>you must print a copy of the filing</b> to maintain in your records.</li> </ul>
<b>CHANGING THE PIN NUMBER / BANKING INFORMATION</b>	You can create or change your personal identification number (PIN) and/ or your banking information at the time you file a return using the e-file system or the telefile system. Follow the instructions carefully. The changes you make will remain in effect until you change them. You may access e-file at <a href="http://www.revenue.nh.gov">www.revenue.nh.gov</a> or telefile at 1-800-328-4557.
<b>ENTERING DOLLAR AMOUNTS</b>	<b>When filing returns and estimates, all dollar amounts must be entered on the E-FILE AND TELEFILE Systems in WHOLE DOLLARS. DO NOT ENTER CENTS.</b> For each telefile entry which requires a dollar amount, you will be asked to enter the pound sign (#) once you have completely entered any dollar amount. The pound sign (#) may be found just below the number 9 of your touch-tone telephone keypad. For example, an operator reporting a meals tax of \$3,197.24 would enter as follows: TELEFILE: "Enter the total meals tax. Enter this amount followed by the pound key (#), now." M&R FILER enters: "3197 #"
<b>CONFIRMATION NUMBER</b>	A 10-digit confirmation number will be provided at the conclusion of all TELEFILE and E-FILE transactions. This confirmation number will provide a record of the electronic filing transaction and should be retained in the operator's records. (Note: A space has been provided to record this item on Line 22 of the worksheet contained within this booklet.)

<b>AMENDED &amp; FINAL RETURNS</b>	<b>You may not file amended or final returns through TELEFILE.</b> Amended and final returns may be filed by E-file or paper by using the Meals & Rentals Tax Return (DP-14) contained in this booklet. If filing a final Meals & Rentals Tax Return, your Meals & Rentals Tax License must be returned to the Department. If you need additional forms, you may access them on our web site at <a href="http://www.revenue.nh.gov">www.revenue.nh.gov</a> , you may copy those found in this booklet or call (603) 271-2192. Questions concerning amended or final returns may be directed to (603) 271-2191.
<b>WHEN TO FILE AND PAY TAX</b>	E-File or Telefile returns filed timely will not have the payment, which is on Line 20 of the worksheet, deducted from their bank account until the next business day <b>after the return due date</b> (generally the 16th of each month). E-file or Telefile payments for late filed returns will be deducted on the next business day following the day the return was filed. You may access the TELEFILE and E-FILE systems 24 hours a day, 7 days a week. E-File or Telefile returns will be considered timely filed when a confirmation number is received by the TELEFILE or E-FILE system prior to 12:00 midnight on the date due. <b>Paper returns must be received by the Department no later than the due date shown on the worksheet. The postmark on your envelope does not constitute a timely filed return.</b>
<b>INTEREST AND PENALTIES</b>	Interest and penalties will be charged on all late filed and late paid returns. For assistance in calculating interest and penalties see instructions on page 6. Payments are applied in accordance with Rev 2903.05.
<b>ELIGIBILITY REQUIREMENTS FOR 3% COMMISSION AND PAPER RETURNS</b>	Per RSA 78-A:7, III operators are permitted to take a commission equal to 3% of the tax due if they meet all of the following requirements: (1) keep the prescribed records, (2) file the return timely, (3) pay the tax due timely and (4) follow the appropriate method of filing.  Operators may elect to file paper returns rather than file electronically; however, this election will result in the <b>loss of the 3% commission</b> , if taxable revenue was equal to or greater than \$25,000 in the prior calendar year. Operators are reminded to self-monitor their gross receipts to avoid loss of their commission and assessment of applicable penalties.  Failure to keep adequate records will result in the loss of any 3% commissions taken, the assessment of a 10%, 25% or 50% penalty on any additional tax due and/or the suspension/revocation of the operator's license.
<b>CONSOLIDATED REPORTING</b>	Operators having more than one license may request permission in writing to file on a consolidated basis provided all licenses use the same federal employer identification number. The request to the Department shall include the following: <ul style="list-style-type: none"> <li>(a) Operator's designation of one license number to be the master license number;</li> <li>(b) Business name and each license number for each member of the consolidated group;</li> <li>(c) Address for each license; and</li> <li>(d) A statement that the operator agrees to the requirements of Rev 704.</li> </ul> To qualify for consolidated reporting the operator agrees: <ul style="list-style-type: none"> <li>(a) To notify the Department, in writing, of any additions or deletions to the consolidated group within ten (10) days of any change;</li> <li>(b) To continue to use the designated master license number unless written approval has been granted to change the designation;</li> <li>(c) To keep records readily available which show activity by month for each individual license;</li> <li>(d) To permit the Department to make an assessment against and collect from the master license for any member of the consolidated group when the records required in (3) are not made available; and</li> <li>(e) If the consolidated return is late or the payment is late, then interest and penalties shall be applied as if individual returns had been filed.</li> </ul>
<b>QUARTERLY FILERS</b>	Any operator who has been in business for a full year whose year-round business has an average monthly tax liability of less than \$100 per month may request in writing to file quarterly returns. For additional information, please call (603) 271-2191.
<b>SEASONAL FILERS</b>	Any operator whose business is not open year round may request in writing to file only for the months operated during the year provided the filing months are consecutive. Operators previously approved for seasonal filing need <b>NOT</b> reapply each year unless their season changes. For additional information, please call (603) 271-2191.
<b>ENTITY CHANGE</b>	Entity changes in businesses require a <b>new license</b> , Form CD-3. This information must include the complete name, address, telephone, title and social security number of each new owner.
<b>UPDATES &amp; CHANGES</b>	Operators must complete and file the Form CD-100 and submit it to the Department any time there is an address change, name change, ownership change or change in sale of taxable items.
<b>NEED FORMS?</b>	To obtain additional forms or forms not contained in this booklet, please call (603) 271-2192. Copies of the state tax forms may also be obtained from our web site at <a href="http://www.revenue.nh.gov">www.revenue.nh.gov</a> or by visiting any of the 21 Depository Libraries located throughout the state.
<b>NEED HELP?</b>	Call (603) 271-2191, Monday through Friday, 8:00 am to 4:30 pm. All written correspondence to the Department should include the operator name, license number, tax period, the name of a contact person and a daytime telephone number and should be sent to New Hampshire Department of Revenue Administration, PO Box 454, Concord, NH 03302-0454. Individuals with hearing or speech impairments may call TDD access: Relay NH 1-800-735-2964.

**MEALS & RENTALS TAX WORKSHEET**

## LINE-BY-LINE TELEFILE INSTRUCTIONS

Prior to filing a return, all licensed operators must complete the WORKSHEET found in this booklet. This worksheet will provide an historical record of the Meals & Rentals Tax reported by your business each month during the year. The worksheet is to be maintained with your records for three (3) years from the due date of tax or date the return is filed, whichever is later.

**When using E-File, follow the instructions on the screen.**

The shaded lines on this instruction page and those found on the Meals & Rentals Tax worksheet are the **ONLY** entries which the Telefile system will request you to enter or verify when filing your return.

Enter **ONLY** the requested items. **DO NOT ENTER YOUR GROSS SALES RECEIPTS ON TELEFILE.** If you have questions regarding these entries, call (603) 271-2191.

**ENTER** your business name on the line in the upper left corner of the worksheet.

**ENTER** your **six (6)** digit Meals & Rentals Tax license number in the block located in the upper left corner of the worksheet.

**DO NOT ENTER** your personal identification number (PIN) on the worksheet. The PIN is necessary for filing your return on the TELEFILE and/or the E-FILE system: however, this number should not be disclosed to anyone **except** those persons specifically authorized to act on your behalf.

**Receipts from Meals & Beverages**

<b>LINE 1</b>	<b>Enter</b> the net receipts/net sales for the period for items sold if the tax <b>is not</b> included in the price of the item sold.
<b>LINE 2</b>	<b>Multiply</b> Line 1 x .08 and <b>Enter</b> on Line 2.
<b>LINE 3</b>	<b>Enter</b> the gross receipts/gross sales for the period for items if the tax <b>is</b> included in the price of the item sold.
<b>LINE 4</b>	<b>Multiply</b> Line 3 x .0741 and <b>Enter</b> on Line 4.
<b>LINE 5</b>	<b>Enter</b> the TOTAL MEALS TAX, Line 2 plus Line 4. Round to the nearest dollar and <b>ENTER WHOLE DOLLARS ONLY.</b>

**Receipts from Rentals**

<b>LINE 6</b>	<b>Enter</b> the total room rental receipts minus any tax-exempt amount described on Line 21.
<b>LINE 7</b>	<b>Enter</b> permanent resident receipts. (Receipts received from occupants having greater than 185 days of continuous occupancy are not subject to the Meals & Rentals Tax.)
<b>LINE 8</b>	<b>Enter</b> the taxable room rental receipts, Line 6 minus Line 7.
<b>LINE 9</b>	<b>Enter</b> the TOTAL ROOM RENTAL TAX. Check the rate which applies. Line 8 x rate, .08 if tax excluded or .0741 if tax included. Round to the nearest dollar and <b>ENTER WHOLE DOLLARS ONLY.</b>
<b>LINE 10</b>	<b>Enter</b> the total motor vehicle rental receipts.
<b>LINE 11</b>	<b>Enter</b> the TOTAL MOTOR VEHICLE RENTAL TAX. Check the rate which applies. Line 10 x rate, .08 if tax excluded or .0741 if tax included. Round to the nearest dollar and <b>ENTER WHOLE DOLLARS ONLY.</b>
<b>LINE 12</b>	<b>Enter</b> the total amount of tax, by adding Line 5 plus Line 9 plus Line 11 to calculate the total amount of the tax.  NOTE: Operators who substantially understate their tax on Line 12 may be assessed a penalty by the Department in the amount of 25% of any underpayment of the tax. A substantial understatement is one which exceeds the greater of 10% of the amount of tax (Line 12) or \$5,000.

**Deductions and Additions**

Commission of 3% may be taken by operators who timely file in accordance with RSA 78-A:8. Commission MAY NOT be deducted by an operator not meeting the requirements of RSA 78-A:7, III. (See eligibility requirements for 3% commission and paper returns in General Instructions.)

<b>Deductions:</b>	
<b>LINE 13</b>	<b>Multiply</b> Line 12 x .03 and <b>Enter</b> total on Line 13.
<b>LINE 14</b>	<b>Enter</b> payments made in advance of the due date for the current tax period <b>or</b> for any Credit Memo you have <b>received</b> from the Department.
<b>LINE 15</b>	<b>Enter</b> total deductions, Line 13 plus Line 14.



NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION  
**MEALS & RENTALS TAX WORKSHEET**  
LINE-BY-LINE INSTRUCTIONS (continued)

<b>Additions:</b>  <b>LINE 16</b>	<p>Tax due not timely paid shall have interest at a rate of 10% per annum for returns due in the year 2008. The interest is calculated on the balance of tax due from the original due date to the date paid.</p> <p><b>Multiply</b> the number of days late x .000273 by the net tax due. <b>Enter</b> this amount on Line 16.</p> <p><b>Example: To calculate interest on a return 15 days late with a tax due of \$500, see below.</b>  <math>15 \text{ days late} \times .000273 = .004095 \times \\$500 = \underline{\\$2.05 \text{ interest due}}</math></p>																								
<b>LINE 17</b>	<p>Tax due not timely paid may have a penalty for failure to pay imposed. A penalty equal to 10% of any nonpayment or underpayment of taxes shall be imposed if the operator fails to pay when due. If the failure to pay is due to fraud, the penalty shall be 50% of the amount of the nonpayment or underpayment.</p> <p><b>Multiply</b> the Net Tax Due (Line 12 minus Line 15) by 10% and <b>Enter</b> on Line 17.</p> <p><b>Example: To calculate the 10% penalty for failure to pay on \$500 tax, see below.</b>  <math>\\$500 \times .10 \text{ penalty for failure to pay} = \underline{\\$50 \text{ penalty due}}</math></p>																								
<b>LINE 18</b>	<p>An operator failing to timely file a complete return may be subject to a penalty for failure to file equal to 5% of the tax due or \$10, whichever is greater, for each month or part thereof that the return remains unfiled or incomplete. The total amount of this penalty shall not exceed 25% of the balance of the tax due or \$50, whichever is greater. Calculate this penalty starting from the original due date of the return until the date a complete return has been filed.</p> <p><b>Multiply</b> the Net Tax Due (Line 12 minus Line 15) by the percentage which applies and <b>Enter</b> the penalty for failure to file on Line 18.</p> <p><b>Example: To calculate the penalty for failure to file, see below.</b></p> <table border="0"> <thead> <tr> <th><u>Tax is:</u></th> <th><u>Due date:</u></th> <th><u>When filed:</u></th> <th><u>Failure to file penalty due:</u></th> </tr> </thead> <tbody> <tr> <td>\$500</td> <td>1/15</td> <td>1/16 - 2/15</td> <td>\$ 25 (tax x 5%) or \$10 whichever is greater</td> </tr> <tr> <td>\$500</td> <td>1/15</td> <td>2/16 - 3/15*</td> <td>\$ 50 (tax x 10%) or \$20 whichever is greater</td> </tr> <tr> <td>\$500</td> <td>1/15</td> <td>3/16 - 4/15</td> <td>\$ 75 (tax x 15%) or \$30 whichever is greater</td> </tr> <tr> <td>\$500</td> <td>1/15</td> <td>4/16 - 5/15</td> <td>\$100 (tax x 20%) or \$40 whichever is greater</td> </tr> <tr> <td>\$500</td> <td>1/15</td> <td>on or after 5/16</td> <td>\$125 (tax x 25%) or \$50 whichever is greater</td> </tr> </tbody> </table> <p>* If the return is due on 1/15 and filed on 2/16, the penalty is calculated at 10%: 5% for the first month, (1/16-2/15) and an additional 5% for each subsequent month or part of the second month not to exceed 25% of the balance of the tax due or \$50, whichever is greater.</p>	<u>Tax is:</u>	<u>Due date:</u>	<u>When filed:</u>	<u>Failure to file penalty due:</u>	\$500	1/15	1/16 - 2/15	\$ 25 (tax x 5%) or \$10 whichever is greater	\$500	1/15	2/16 - 3/15*	\$ 50 (tax x 10%) or \$20 whichever is greater	\$500	1/15	3/16 - 4/15	\$ 75 (tax x 15%) or \$30 whichever is greater	\$500	1/15	4/16 - 5/15	\$100 (tax x 20%) or \$40 whichever is greater	\$500	1/15	on or after 5/16	\$125 (tax x 25%) or \$50 whichever is greater
<u>Tax is:</u>	<u>Due date:</u>	<u>When filed:</u>	<u>Failure to file penalty due:</u>																						
\$500	1/15	1/16 - 2/15	\$ 25 (tax x 5%) or \$10 whichever is greater																						
\$500	1/15	2/16 - 3/15*	\$ 50 (tax x 10%) or \$20 whichever is greater																						
\$500	1/15	3/16 - 4/15	\$ 75 (tax x 15%) or \$30 whichever is greater																						
\$500	1/15	4/16 - 5/15	\$100 (tax x 20%) or \$40 whichever is greater																						
\$500	1/15	on or after 5/16	\$125 (tax x 25%) or \$50 whichever is greater																						
<b>LINE 19</b>	<p><b>Enter</b> the sum of Lines 16, 17 and 18.</p>																								
<b>LINE 20</b>	<p><b>Enter</b> the TOTAL PAYMENT DUE, Line 12 minus Line 15 plus Line 19. Round to the nearest dollar and <b>ENTER WHOLE DOLLARS ONLY</b>. The amount entered here is the amount to be deducted from the account you have authorized for this purpose.</p> <p><b>NOTE:</b> For operators filing a paper return, Form DP-14, enclose a check payable to the State of New Hampshire for the amount shown on Line 20. If less than \$1.00 do not pay but still file the return.</p> <p>Telefile and e-file returns filed timely will have the payment, on Line 20, deducted from the operator's designated account the next business day AFTER THE RETURN DUE DATE (commonly on the 16th of the month). Telefile and e-file payments for late filed returns will be deducted the NEXT BUSINESS DAY following the day the return was filed.</p>																								
<b>LINE 21</b>	<p>Enter the total Meals and Rentals receipts which are exempt from taxation. For example: federal, NH state and NH municipal employees on government business and having the proper documentation may be exempt from the payment of this tax. For further clarification, contact the Department at (603)271-2191. Do not include permanent resident receipts on this line.</p>																								
<b>LINE 22</b>	<p>Telefilers should enter the 10 digit confirmation number assigned by the Telefile System at the conclusion of your filing. This number is an important record of your Telefile transaction and will be requested should any research of your electronic filing be required. Enter this number on your worksheet in the block under the corresponding tax period. E-filers should print a copy of their confirmation prior to exiting the E-FILE system. Telefilers and e-filers must continue to the end of the program to complete transaction and receive a confirmation number.</p> <p><b>IF YOU DID NOT RECEIVE A CONFIRMATION NUMBER, YOUR TRANSACTION <u>DID NOT</u> TRANSMIT TO THE DEPARTMENT.</b></p>																								

**MEALS & RENTALS REQUEST TO  
SUSPEND OR INACTIVATE LICENSE**

**TAXPAYER'S LICENSE #** \_\_\_\_\_  
(ENTER LICENSE NUMBER)

NOTICE IS HEREBY GIVEN to the New Hampshire Department of Revenue Administration that the taxpayer named in item No. 1 below is requesting the following change in filing requirements and/or providing the updated changes as prescribed in RSA 78-A.

1. BUSINESS NAME	
2. CORPORATE NAME, PARTNER NAMES OR PROPRIETOR'S NAME	
3. NUMBER & STREET ADDRESS	
4. ADDRESS (continued)	
5. CITY/STATE/ ZIP CODE	6. PHONE NUMBER

**CHANGE IN BUSINESS STATUS (by location):**

You must surrender your current Meals & Rentals Tax License with this form if you have checked lines 7, 8, 9, or 11.

7. ☐ Business at this location suspended or discontinued entirely, without a new owner ..... DATE \_\_\_\_\_
8. ☐ Business at this location continued without taxable sales as of ..... DATE \_\_\_\_\_
9. ☐ Business at this location was acquired by a new owner as of ..... DATE \_\_\_\_\_

NAME OF NEW OWNER: \_\_\_\_\_

ADDRESS OF NEW OWNER: \_\_\_\_\_

10. ☐ Business NAME change (not a new owner) at this location as of ..... DATE \_\_\_\_\_

NEW BUSINESS NAME: \_\_\_\_\_

11. ☐ Business moved to a new location (not a new owner) as of ..... DATE \_\_\_\_\_

NEW LOCATION: \_\_\_\_\_

NOTE: You must submit Form CD-3 to request a new Meals & Rentals Tax License.

**12. REQUEST FOR CHANGE IN FILING REQUIREMENTS**

I request my filing requirements be changed: **FROM:** \_\_\_\_\_ - \_\_\_\_\_  
month beginning month ending

**TO:** \_\_\_\_\_ - \_\_\_\_\_  
month beginning month ending

I understand a return must be filed for each month in which sales are incurred. I also understand that a return must be filed for each month in which my license is active, even though there may be no tax due.

FOR DRA USE ONLY

**X**

SIGNATURE (IN INK)

PRINTED SIGNATORY NAME & TITLE

DATE

MAIL TO: **NH DRA  
COLLECTION DIVISION  
PO BOX 454  
CONCORD NH 03302-0454**



BUSINESS NAME XYZ Hotel, Restaurant & Auto RentalsLICENSE NUMBER **0 9 9 9 9 9**

Note: This is the operator's six digit license number, not FEIN or SSN.

PIN **Enter PIN on Telefile or E-file**For the month of January  
Filing due date 02/15/2008**NOTE:** TELEFILE users will enter the bolded numbers on Lines 5, 9, 11 and 20 on the TELEFILE system. E-FILE users should follow instructions on E-FILE system.**RECEIPTS FROM MEALS & BEVERAGES**

1	Tax Excluded Receipts	27,000
2	Meals Tax @ 8% (Line 1 multiplied by .08)	2,160
3	Tax Included Receipts	14,000
4	Meals Tax @ 7.41% (Line 3 multiplied by .0741)	1,037
5	<b>TOTAL MEALS TAX</b> (Line 2 plus Line 4)	<b>3,197</b>

COMMON ERROR: Do not enter these numbers into telefile.

← Enter on telefile

**RECEIPTS FROM RENTALS**

6	Room Rental Receipts	10,100
7	Permanent Resident Receipts	100
8	Taxable Room Rental Receipts Line 6 minus Line 7	10,000
9	<b>TOTAL ROOM RENTAL TAX</b> Check rate used. <input checked="" type="checkbox"/> .08 <input type="checkbox"/> .0741 Line 8 multiplied by .08 or .0741 if tax included.	<b>800</b>
10	Motor Vehicle Rental Receipts	5,000
11	<b>TOTAL MOTOR VEHICLE RENTAL TAX.</b> Check rate used. Line 10 x rate, <input checked="" type="checkbox"/> .08 if tax excluded, <input type="checkbox"/> .0741 if tax included. Round to nearest dollar.	<b>400</b>
12	<b>TOTAL TAX</b> (Line 5 plus Line 9 plus Line 11)	4,397

← Enter on telefile

← Enter on telefile

**FOR EXAMPLE:**

XYZ Hotel, Restaurant and Auto Rental, License # 099999, a sample company, has the following sales in the month of January, 2008:

Net Receipts/Sales ..... \$27,000.00  
(tax not included in sale price)Gross Receipts/Sales ..... \$14,000.00  
(tax is included in sale price)

Room Rental Receipts ..... \$10,100.00

Permanent Resident Receipts ..... \$ 100.00

Motor Vehicle Rental Receipts ..... \$ 5,000.00

**DEDUCTIONS AND ADDITIONS**

13	Commission (Line 12 multiplied by .03) See 3% commission requirement in General Instructions.	132
14	Advanced Payment or Credit Memo	0
15	<b>TOTAL DEDUCTIONS</b> (Line 13 plus Line 14)	132
16	Interest (See instructions)	0
17	Penalty for Failure to Pay (See instructions)	0
18	Penalty for Failure to File (See instructions)	0
19	<b>TOTAL ADDITIONS</b> (Sum of Lines 16, 17 & 18)	0

20	<b>TOTAL PAYMENT DUE</b> (Line 12 minus Line 15 plus Line 19)	<b>4,265</b>
----	--	--------------

← Enter on telefile

Payment authorized on Line 20 will be debited from your account the next business day after the filing due date

21	<b>TAX EXEMPT MEALS &amp; RENTALS RECEIPTS</b> (See instructions)	0
----	---	---

January

22	<b>CONFIRMATION NUMBER</b>	<u>1 1 1 1 1</u> <u>1 1 1 1 1</u>
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NOTE: If you do not receive a confirmation number from either telefile or e-file, your transaction did not transmit to the Department.

BUSINESS NAME \_\_\_\_\_

**STATE OF NEW HAMPSHIRE**

LICENSE NUMBER

--	--	--	--	--	--

Note:

(This is the Operator's six digit License number, not FEIN or SSN)PIN **Enter PIN on Telefile or E-File**

THIS WORKSHEET MUST BE COMPLETED PRIOR TO FILING THE NH MEALS &amp; RENTALS RETURN

For the month of

Filing due date

January

February

March

April

May

02/15/2008

03/17/2008

04/15/2008

05/15/2008

06/16/2008

**RECEIPTS FROM MEALS AND BEVERAGES**

1	Tax Excluded Receipts					
2	Meals Tax @ 8% (Line 1 multiplied by .08)					
3	Tax Included Receipts					
4	Meals Tax @ 7.41% (Line 3 multiplied by .0741)					
5	<b>TOTAL MEALS TAX</b> (Line 2 plus Line 4)					

**RECEIPTS FROM RENTALS**

6	Room Rental Receipts					
7	Permanent Resident Receipts					
8	Taxable Room Rental Receipts Line 6 minus Line 7					
9	<b>TOTAL ROOM RENTAL TAX</b> Check rate used. <input type="checkbox"/> .08 <input type="checkbox"/> .0741 Line 8 multiplied by .08 or .0741 if tax included.					
10	Motor Vehicle Rental Receipts					
11	<b>TOTAL MOTOR VEHICLE RENTAL TAX.</b> Check rate used. Line 10 x rate, <input type="checkbox"/> .08 if tax excluded, <input type="checkbox"/> .0741 if tax included. Round to nearest dollar.					
12	<b>TOTAL TAX</b> (Line 5 plus Line 9 plus Line 11)					

**DEDUCTIONS AND ADDITIONS**

13	Commission (Line 12 multiplied by .03) See 3% commission requirement in General Instructions.					
14	Advanced Payment or Credit Memo					
15	<b>TOTAL DEDUCTIONS</b> (Line 13 plus Line 14)					
16	Interest (See instructions)					
17	Penalty for Failure to Pay (See instructions)					
18	Penalty for Failure to File (See instructions)					
19	<b>TOTAL ADDITIONS</b> (Sum of Lines 16, 17 & 18)					

20	<b>TOTAL PAYMENT DUE</b> (Line 12 minus Line 15 plus Line 19)					
----	--	--	--	--	--	--

**Payment authorized on Line 20 will be debited from your account the next business day after the filing due date**

21	<b>TAX EXEMPT MEALS &amp; RENTALS RECEIPTS</b> (See instructions)					
----	---	--	--	--	--	--

January

February

March

April

May

THE TELEFILE SYSTEM WILL PROVIDE A 10 DIGIT CONFIRMATION NUMBER TO VERIFY THE

22	<b>CONFIRMATION NUMBER</b>					
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# MEALS & RENTALS TAX WORKSHEET

# 2008

Telefile Telephone Number 1-800-328-4557  
E-File at [www.revenue.nh.gov](http://www.revenue.nh.gov)

AND MUST BE RETAINED FOR THREE YEARS FROM THE DUE DATE OF THE TAX OR THE DATE THE RETURN IS FILED WHICHEVER IS LATER.

June	July	August	September	October	November	December	TOTAL
07/15/2008	08/15/2008	09/15/2008	10/15/2008	11/17/2008	12/15/2008	01/15/2009	2008

## RECEIPTS FROM MEALS AND BEVERAGES

1							
2							
3							
4							
5							

## RECEIPTS FROM RENTALS

6							
7							
8							
9							
10							
11							
12							

## DEDUCTIONS AND ADDITIONS

13							
14							
15							
16							
17							
18							
19							
20							

above if the return is timely filed and on the next business day following the date the return was filed for late filed return.

21							
----	--	--	--	--	--	--	--

June	July	August	September	October	November	December	2008
------	------	--------	-----------	---------	----------	----------	------

TRANSACTION. PLEASE ENTER THE NUMBER IN THE APPROPRIATE SPACE BELOW.

22							
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NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION  
**FREQUENTLY ASKED QUESTIONS (FAQ's)**

<b>ARE NON-PROFITS EXEMPT FROM THE MEALS &amp; RENTALS TAX?</b>	No organization, including non-profit organizations, are exempt from the Meals and Rentals Tax. However, there are limited exemptions for the following: <ul style="list-style-type: none"> <li>a. Meals and Rentals charges incurred in the course of official business by federal government employees, New Hampshire state, county or municipal employees. The operator must receive a purchase order from the governmental entity and payment from the government's treasurer or through a government authorized credit card.</li> <li>b. Persons possessing diplomatic tax exempt cards issued by the US Department of State.</li> <li>c. Rents incurred as the result of the partial or complete destruction of a person's permanent residence.</li> <li>d. Meals paid for with food stamps/coupons.</li> <li>e. Some schools and students.</li> </ul> <p>If you have any questions about tax exempt sales, please call the Department at (603) 271-2191. The State of New Hampshire does not issue Meals &amp; Rentals Tax exempt certificates.</p>
<b>WHAT RECORDS DO I NEED TO KEEP AND FOR HOW LONG?</b>	Keep all records used to record and report your Meals & Rentals Tax for three (3) years from the due date of the tax or the date the return was filed, whichever is later. This includes the telefile worksheet, e-file screen prints, cash receipts journals, cash disbursement journals, general ledgers, payroll records, complete cash register tapes, guest checks and registration cards, bank statements with all enclosures and any other source document used in your accounting records. If you sell both taxable and non-taxable items, you must maintain records which justify the non-taxable sales.
<b>WHAT CHARGES ASSOCIATED WITH AUTOMOBILE RENTALS ARE TAXABLE?</b>	All charges included in the rental agreement are taxable including but not limited to airport fees, drop off fees and under age fees. The following items are not subject to the tax when separately stated in the agreement. Example: <ul style="list-style-type: none"> <li>a. Charges for fuel</li> <li>b. Charges for insurance</li> <li>c. Charges for damages</li> </ul> <p>If the motor vehicle lease or rental agreement does not exceed 180 consecutive days, the lease or rental is subject to the Meals and Rentals Tax.</p>
<b>WHEN IS LONG TERM ROOM RENTAL SUBJECT TO THE MEALS &amp; RENTALS TAX?</b>	Tax must be collected on all room rentals of less than 185 consecutive days. When a patron reaches the 185th consecutive day of occupancy, the operator must refund to the patron the tax monies that have been collected. The operator must then send to the Department verification of the refund (a copy of the canceled check or a signed statement from the patron that he/she has received the refund) along with documentation supporting the length of occupancy to the Audit Division PO Box 457, Concord, NH 03302-0457. The Department will then issue a credit memo. Once the credit memo is received, the operator may use it to reduce a subsequent tax payment. The credit memo amount should be entered on Line 14 of the Meals & Rentals Tax worksheet. Note: Operators may not utilize any credit amount until they have received a credit memo from the Department. Operators should utilize the amount of the most recent credit memo they have received as the total is cumulative.
<b>WHERE CAN I GET A COPY OF THE MEALS &amp; RENTALS TAX LAW AND RULES?</b>	The Meals & Rentals Tax law (RSA 78-A) and Administrative Rules (Chapter 700) are available for free through the Department's web site on the internet at <a href="http://www.revenue.nh.gov">www.revenue.nh.gov</a> , or copies can be made for a fee by visiting the New Hampshire State Library or any New Hampshire Depository Library.
<b>DO I NEED A SEPARATE LICENSE FOR CATERING?</b>	Yes, a license is required for each fixed location where meals are regularly served and a separate license where meals are occasionally served for events such as, but not limited to: banquets, weddings, barbecues, outings, picnics, private homes, etc.
<b>HOW ARE BAKERY PRODUCTS TAXED?</b>	All bakery products sold in quantities of less than six from a restaurant are taxable. A bakery is classified as a restaurant when it offers other taxable items for sale such as, but not limited to, coffee, soda, sandwiches, salads from the salad bar, and/or prepared foods. The taxability of bakery products is not affected by whether the bakery product is served to be eaten on premise or on a "to go" basis.
<b>HOW SHOULD I HANDLE COUPONS AND DISCOUNT SALES?</b>	The tax should be applied to the sale amount after the discount or coupon reduction has been taken.
<b>ARE GRATUITIES AND SERVICE CHARGES TAXED?</b>	Mandatory gratuity and service charges added to the charge for a meal or room may be taxed in certain circumstances. See RSA 78-A:6-a for more information.
<b>ARE PARTY PLATTERS TAXABLE EVEN IF I AM NOT SERVING?</b>	Yes, party platters such as, but not limited to, vegetable, meat, dessert, fruit, and hors-d' oeuvres, are taxable whether delivered, picked up, served or not.
<b>ARE FUNCTION ROOM RENTALS TAXABLE?</b>	Yes, any type of room rental in a hotel (or any facility with sleeping accommodations) is subject to the tax.
<b>DO I NEED TO FILE A RETURN EVERY MONTH EVEN IF I HAVE NO ACTIVITY?</b>	Yes, you must file a return even if you have had no activity during your scheduled reporting periods.

These questions are not intended to be inclusive of every situation. If you have any questions regarding the taxability of any product or rental, please contact the Department at (603) 271-2191.

## APPLICATION FOR MEALS & RENTALS TAX

## OPERATORS LICENSE & RENEWAL

**LICENSE REQUIRED BEFORE OPERATING**

Be sure to read instructions on reverse side before filling out this form.

\$5.00 fee must accompany this application

☐ New Application☐ **Renewal License #** \_\_\_\_\_

FOR DRA USE ONLY

License Number

Date Issued

## Filing Requirements

☐ \$5.00 FEE

PLEASE TYPE OR PRINT CLEARLY

1	BUSINESS NAME	<b>Filing Requirements</b> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <div style="border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 5px 0;"> </div> <b>\$5.00 FEE</b>		
2	NAME OF ENTITY			
3	MAILING ADDRESS			
4	MAILING ADDRESS CONTINUED			
5	CITY OR TOWN			
		STATE	ZIP CODE	

6a Type of Legal Organization: ☐ (1) Proprietorship ☐ (2) Corporation ☐ (3) Partnership ☐ (4) Fiduciary ☐ (5) Non-Profit

6b LLC Taxed as: ☐ (1) Proprietorship ☐ (2) Corporation ☐ (3) Partnership **Complete either 6(a) or 6(b) but not both.**

7 Federal Employer Identification Number of the above operation: FEIN [ ] [ ] — [ ] [ ] [ ] [ ] [ ] [ ] (Do Not Enter SSN Here)

8 If you have not entered an FEIN on line 7 above, under what social security number or department identification number will your business taxes for this operation be filed? SSN: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] or DIN: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

9 List individual owner, partners, members or managing member (see instructions) or president and treasurer:

PRINT NAME	SOCIAL SECURITY NUMBER	RESIDENCE ADDRESS
TITLE		CITY/TOWN, STATE, ZIP CODE
PRINT NAME	SOCIAL SECURITY NUMBER	RESIDENCE ADDRESS
TITLE		CITY/TOWN, STATE, ZIP CODE
PRINT NAME	SOCIAL SECURITY NUMBER	RESIDENCE ADDRESS
TITLE		CITY/TOWN, STATE, ZIP CODE

10	Contact Person if other than above	PRINT NAME	TITLE
----	------------------------------------	------------	-------

11 Cellular # ( ) Business # ( ) Residence Telephone # ( )

12	Physical Business Address in NH	STREET, CITY, ZIP CODE
----	---------------------------------	------------------------

13	Proposed opening date	(Required) for new application)	14	Type of business activity
----	-----------------------	------------------------------------	----	---------------------------

15 Check here if you serve.... ☐ Food ☐ Alcoholic Beverages Number of Seats in Restaurant and/or Lounge

16 Check here if you rent..... { ☐ Sleeping Accommodations { ☐ Function Rooms { ☐ Motor Vehicles  
☐ Number of Rooms ☐ Number of Seats in Function Room

17 Check here ☐ if you are requesting permission to file returns on a seasonal basis (less than twelve returns per year).

If yes what months will the business operate?

18 Prior business name  Prior Owner(s)

FOR DRA USE ONLY

I hereby certify that the above given information is true and correct and in conformity with applicable state laws.

**X**

SIGNATURE (IN INK) OF TAXPAYER

DATE \_\_\_\_\_

---

PRINT SIGNATORY NAME & TITLE

Make checks payable to State of New Hampshire

MAIL TO: NH DRA  
COLLECTION DIVISION  
PO BOX 454  
CONCORD, NH 03302-0454

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION  
**APPLICATION FOR MEALS & RENTALS TAX OPERATORS**  
**LICENSE & RENEWAL (RSA 78-A:4)**  
 GENERAL INSTRUCTIONS

<b>WHO MUST FILE</b>	Each operator shall obtain a license from the Department for each place of business within the state where it operates a hotel, sells taxable meals, or rents motor vehicles. The license remains valid until the business ceases operation, a change in ownership occurs, the license is revoked or suspended by the Department or the license expires. The license shall be conspicuously posted in a public area upon the premises to which it relates.
<b>WHEN TO FILE</b>	A New Hampshire Meals & Rentals Tax License must be obtained prior to the start of business and renewed by June 30 of each odd-numbered year. File this form at least 30-days prior to the start of business or the expiration date, of the existing license.
<b>WHERE TO FILE</b>	Mail to: NH DRA, PO Box 454, Concord, NH 03302-0454.
<b>LICENSE FEE</b>	The fee for an original license or timely license renewal is \$5. The fee shall be paid with the license application. Make check or money order payable to the STATE OF NEW HAMPSHIRE.
<b>NEED HELP</b>	If you have any questions regarding the Meals and Rentals Tax, the TELEFILE System or the E-FILE System, Central Taxpayer Services is available between 8:00 am and 4:30 pm, Monday through Friday (603) 271-2191.
<b>ELEC-TRONIC FILER</b>	Any operator that does not choose to file electronically shall forfeit any amounts retained pursuant to RSA 78-A:7, III to the Department to offset the costs of manual paper filing. The forfeiture shall be waived for any business with under \$25,000 in meals and rentals taxable revenue in the prior calendar year.
<b>Incomplete applications will be returned to the applicant and will result in a delay in issuing. Some common omissions/errors are:</b> <ul style="list-style-type: none"> <li>* Application is incomplete or illegible</li> <li>* The application is not signed</li> <li>* Missing payment</li> <li>* Entering the president's name rather than corporation name on Line 2</li> </ul>	
<b>Request Type</b>	Check the appropriate box to indicate if this is an application for a new license or a renewal of an existing license. If this is an application for renewal, provide your current six digit license number issued by the Department.
<b>Line 1</b>	Type or Print Business/Trade Name.
<b>Line 2</b>	Type or Print the business entity name (Corporation, Partnership, or Proprietor's Name).
<b>Line 3</b>	Type or Print the mailing address - abbreviate when possible.
<b>Line 4</b>	Type or Print the Post Office Box, Rural Route number, etc.
<b>Line 5</b>	Type or Print the City or Town, State and Zip code.
<b>Line 6a</b>	Check the type of legal organization if other than a Limited Liability Company (LLC).
<b>Line 6b</b>	If this operation is a Limited Liability Company (LLC) show whether the entity is taxed as a proprietorship, corporation or partnership.
<b>Line 7</b>	Type or print the Federal Employer Identification Number. If applied for, enter "applied for" and notify the Department when received.
<b>Line 8</b>	Type or print the Social Security Number or Department Identification Number (DIN) under which your business taxes for this operation will be reported.
<b>Line 9</b>	List the names, titles, social security numbers and home addresses of the individual owners (Proprietorships), partners (Partnerships), members/managing members (Limited Liability Companies), president/treasurer and anyone else in a managerial capacity (Corporations). If additional space is needed, attach a schedule detailing the same information. A managing member is an owner who is actively involved in the daily operations of the Limited Liability Company.
<b>Disclosure of SSN:</b>	Disclosure of your Social Security Number is mandatory under Department of Revenue Administration Rule 708.04(c)(5). This information is required for the purpose of administering the tax laws of this state and authorized by 42 U.S.C.S. 405(c)(2)(C)(i). The tax information which is disclosed to the New Hampshire Department of Revenue Administration is held in strict confidence by law. The information may be disclosed to the US Internal Revenue Service, agencies responsible for the administration of taxes in other states in accordance with compacts for the exchange of information, and as otherwise authorized by NH RSA 21-J:14. The failure to provide a Social Security Number will result in a rejection of an application.
<b>Line 10</b>	Enter the designated person to contact regarding licensing, returns, or payments with a telephone number if different than the number on line 11.
<b>Line 11</b>	Provide the business, cellular and home telephone numbers.
<b>Line 12</b>	Type or Print the actual address where the business is located. For example, "1 Main St., Manchester, NH".
<b>Line 13</b>	Enter the proposed opening date of the business. NOTE: This license is required prior to commencing operations.
<b>Line 14</b>	Enter the type of business activity. (For example, hotel, inn, restaurant, tavern, club, motel, dairy bar, ski area, tourist home, cottage, motor vehicle rentals, store, service station, rental agent and caterer, etc.). Note: If catering is provided, as well as other business activities a separate license is required for the catering.
<b>Line 15</b>	Check all applicable items served by this business. Indicate number of seats in restaurant and/or lounge.
<b>Line 16</b>	Check appropriate box(es) to indicate if the business provides sleeping accommodations (indicate number of rooms), function rooms (indicate number of seats), or motor vehicle rentals.
<b>Line 17</b>	If this is a seasonal business indicate the months it will be operated. If the operator desires to file tax returns on a seasonal basis that is less than twelve returns per year, check the appropriate block. Monthly filing will be required unless seasonal permission is granted. A return is required for each month of the filing status, whether there is tax due or not.
<b>Line 18</b>	In case of change of ownership, provide the name the business previously operated under and the name of former owner(s).
<b>Signature</b>	The signature and title, in ink, of the person who is certifying the application information is required on all forms. You certify that the given information is true and correct and in conformity with applicable state laws.





## MEALS &amp; RENTALS TAX RETURN

FOR DRA USE ONLY

MAKE SUFFICIENT COPIES FOR ALL YOUR FILING PERIODS BEFORE FILLING OUT THIS FORM.

BUSINESS NAME:

License Number

--	--	--	--	--	--

Tax Period (Mo/Yr)

--

Due on the 15th day of  
the month following the  
close of the tax period.Amended  
Return ☐☐ ① Business Discontinued

IF THIS IS YOUR FINAL RETURN, PLEASE GIVE REASON:

☐ ② Change in Organization☐ ③ Business Sold

Last Day of Business \_\_\_\_\_

## RECEIPTS FROM MEALS AND BEVERAGES

1	Tax Excluded Receipts.....	1		
2	Meals Tax on gross receipts at 8% (Multiply Line 1 by .08).....	2		
3	Tax Included Receipts.....	3		
4	Meals Tax at 7.41% (Multiply Line 3 by .0741).....	4		
5	<b>Total Meals Tax</b> (Line 2 plus Line 4).....	5		

## RECEIPTS FROM RENTALS

6	Room Rental Receipts.....	6		
7	Permanent Resident Receipts.....	7		
8	Taxable Room Rental Receipts (Line 6 minus Line 7).....	8		
9	<b>Total Room Rental Tax</b> (Multiply Line 8 by .08 or .0741).....Check rate used: <input type="checkbox"/> .08 <input type="checkbox"/> .0741 .....	9		
10	Motor Vehicle Rental Receipts.....	10		
11	<b>Total Motor Vehicle Rental Tax</b> (Multiply Line 10 by .08 or .0741)....Check rate used: <input type="checkbox"/> .08 <input type="checkbox"/> .0741 .....	11		
12	<b>Total Tax</b> ( Line 5 plus Line 9 plus Line 11).....	12		

## DEDUCTIONS AND ADDITIONS

13	Commission (Line 12 multiplied by .03.) ..... (See 3% commission eligibility requirement in General Instructions)	13		
14	Original Return Payment/Credit Memo/Estimated Payments.....	14		
15	<b>Total Deductions</b> (Line 13 plus Line 14).....	15		
16	Interest (See instructions).....	16		
17	Penalty for Failure to Pay (See instructions).....	17		
18	Penalty for Failure to File (See instructions).....	18		
19	<b>Total Additions</b> (Sum of Lines 16, 17 & 18).....	19		
20	<b>Total Due</b> (Line 12 minus Line 15, plus Line 19) Make check payable to State of New Hampshire..... <b>Enclose, but do not staple or tape, your payment with the return.</b>	20		
21	<b>Tax Exempt Meals &amp; Rentals Receipts</b> .....	21		

FOR DRA USE ONLY

Under penalties of perjury, I declare that I have examined this form and to the best of my belief it is true, correct and complete.  
If prepared by a person other than the operator, this declaration is based on all information of which the preparer has knowledge.**X**

SIGNATURE (IN INK) (Failure to sign may result in the assessment of penalties.)

PREPARER OTHER THAN OPERATOR

DATE

TELEPHONE NUMBER

DATE

PRINT PREPARER'S NAME &amp; TAX IDENTIFICATION NUMBER

MAIL  
TO:NH DRA  
DOCUMENT PROCESSING DIVISION  
PO BOX 2035  
CONCORD NH 03302-2035

PREPARER'S ADDRESS

CITY/TOWN, STATE, ZIP CODE





## MEALS &amp; RENTALS TAX RETURN

FOR DRA USE ONLY

MAKE SUFFICIENT COPIES FOR ALL YOUR FILING PERIODS **BEFORE** FILLING OUT THIS FORM.

BUSINESS NAME:

License Number

Tax Period (Mo/Yr)

Due on the 15th day of  
the month following the  
close of the tax period.Amended  
Return ☐

## IF THIS IS YOUR FINAL RETURN, PLEASE GIVE REASON:

☐ ① Business Discontinued☐ ② Change in Organization☐ ③ Business Sold

Last Day of Business \_\_\_\_\_

## RECEIPTS FROM MEALS AND BEVERAGES

1	Tax Excluded Receipts.....	1		
2	Meals Tax on gross receipts at 8% (Multiply Line 1 by .08).....	2		
3	Tax Included Receipts.....	3		
4	Meals Tax at 7.41% (Multiply Line 3 by .0741).....	4		
5	<b>Total Meals Tax</b> (Line 2 plus Line 4).....	5		

## RECEIPTS FROM RENTALS

6	Room Rental Receipts.....	6		
7	Permanent Resident Receipts.....	7		
8	Taxable Room Rental Receipts (Line 6 minus Line 7).....	8		
9	<b>Total Room Rental Tax</b> (Multiply Line 8 by .08 or .0741).....Check rate used: <input type="checkbox"/> .08 <input type="checkbox"/> .0741 .....	9		
10	Motor Vehicle Rental Receipts.....	10		
11	<b>Total Motor Vehicle Rental Tax</b> (Multiply Line 10 by .08 or .0741)....Check rate used: <input type="checkbox"/> .08 <input type="checkbox"/> .0741 .....	11		
12	<b>Total Tax</b> ( Line 5 plus Line 9 plus Line 11).....	12		

## DEDUCTIONS AND ADDITIONS

13	Commission (Line 12 multiplied by .03.) ..... (See 3% commission eligibility requirement in General Instructions)	13		
14	Original Return Payment/Credit Memo/Estimated Payments.....	14		
15	<b>Total Deductions</b> (Line 13 plus Line 14).....	15		
16	Interest (See instructions).....	16		
17	Penalty for Failure to Pay (See instructions).....	17		
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## MEALS &amp; RENTALS TAX RETURN

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BUSINESS NAME:

License Number

Tax Period (Mo/Yr)

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